

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>AS</i>	<i>698101</i>	<i>9/19</i>
O.I.P.E. CLASSIFIER		<i>8</i>	<i>7-28-00</i>
FORMALITY REVIEW	<i>Z</i>	<i>JCSSI</i>	<i>10-24-00</i>
RESPONSE FORMALITY REVIEW			

**BEST AVAILABLE COPY**

**INDEX OF CLAIMS**

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)..... Canceled      A ..... Appeal  
 ÷ ..... Restricted      O ..... Objected

Claim	Date
Final Original	
1 2	<i>9/19</i>
2 3	<i>9/19</i>
3 4	<i>9/19</i>
4 5	<i>9/19</i>
5 6	<i>9/19</i>
6 8	<i>9/19</i>
7 9	<i>9/19</i>
8 10	<i>9/19</i>
9 12	<i>9/19</i>
10 13	<i>9/19</i>
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If more than 150 claims or 10 actions  
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